

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address		Douglas Aircraft Co. 190th & Normandie Torrance, CA 90502		A. State Manifest Document Number 86234286		
4. Generator's Phone (213 533-6677)		6. US EPA ID Number ICIAID0181615110101015		B. State Generator's ID HA-HQ-36-005698		
5. Transporter 1 Company Name J. C. Liquid Waste Disposal		8. US EPA ID Number ICIAID01518101118131617		C. State Transporter's ID 709746		
7. Transporter 2 Company Name		10. US EPA ID Number		D. Transporter's Phone 213 268-3137		
9. Designated Facility Name and Site Address CHEM-TECK SYSTEMS, INC. 3650 E. 26th St. Los Angeles, CA 90023		12. Containers		E. State Transporter's ID		
		No. Type		F. Transporter's Phone		
		13. Total Quantity		G. State Facility's ID		
		14. Unit Wt/Vol		H. Facility's Phone		
		I. Waste No.				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		
a. Hazardous Waste Liquid NOS ORM-E NA9189		No. Type		14. Unit Wt/Vol		
		001 TT		G		
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
Alkalante Soap 5%				01		
Grease 2%						
Oil 3%						
Water 90%						
15. Special Handling Instructions and Additional Information		Guide #31				
Use gloves, goggles, respirator - If rejected, return to DAC.						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.						
Printed/Typed Name		Signature		Month Day Year		
Donald C. Gerber		sb		10/11/16/87		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
C. RODRIGUEZ		C. Rodriguez		10/11/16/87		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name		Signature		Month Day Year		
ELEO A. NG / CHEM-TECK		ELEO A. NG		11/1/16/87		

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5. Transporter 1 Company Name		7. Transporter 2 Company Name		C. State Transporter's ID CAD 88510005		
J. C. Liquid Waste Disposal		I. C. Liquid Waste Disposal		D. Transporter's Phone 704746		
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID 213 268-3137		
9. Designated Facility Name and Site Address		10. US EPA ID Number		F. Transporter's Phone		
CHEM-TECK SYSTEMS, INC. 3650 E. 26th St. Los Angeles, CA 90023		I. C. Liquid Waste Disposal		G. State Facility's ID CAT 080033681		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		
a. Hazardous Waste Liquid NOS ORM-E NA9189		No. Type		14. Unit Wt/Vol		
		001 TT		05000 G		
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
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Printed/Typed Name		Signature		Month Day Year		
Donald C. Gerber		sb		10/11/68		
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
Printed/Typed Name		Signature		Month Day Year		
C. RODRIGUEZ		C. RODRIGUEZ		10/11/68		
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month Day Year		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
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